

SERFF Tracking Number:	ERCB-125773446	State:	Arkansas
Filing Company:	Westport Insurance Corporation	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-08-03861		
TOI:	26.0 Burglary & Theft	Sub-TOI:	26.0001 Commercial Burglary & Theft
Product Name:	Terrorism Form Withdrawal		
Project Name/Number:	Terrorism Form Withdrawal/AR-08-03861		

Filing at a Glance

Company: Westport Insurance Corporation

Product Name: Terrorism Form Withdrawal

TOI: 26.0 Burglary & Theft

Sub-TOI: 26.0001 Commercial Burglary & Theft Co Tr Num: AR-08-03861

Filing Type: Form

SERFF Tr Num: ERCB-125773446 State: Arkansas

SERFF Status: Closed

Co Tr Num: AR-08-03861

Co Status:

Author: Rod Clark

Date Submitted: 08/13/2008

Effective Date Requested (New): 09/01/2008

Effective Date Requested (Renewal): 09/01/2008

State Tr Num: EFT \$50

State Status: Fees verified and received

Reviewer(s): Betty Montesi, Llyweyia Rawlins

Disposition Date: 08/13/2008

Disposition Status: Withdrawn

Effective Date (New): 09/01/2008

Effective Date (Renewal):

09/01/2008

State Filing Description:

General Information

Project Name: Terrorism Form Withdrawal

Project Number: AR-08-03861

Reference Organization:

Reference Title:

Filing Status Changed: 08/13/2008

State Status Changed: 08/13/2008

Corresponding Filing Tracking Number:

Filing Description:

Status of Filing in Domicile: Pending

Domicile Status Comments:

Reference Number:

Advisory Org. Circular:

Deemer Date:

On behalf of Westport Insurance Corporation, we wish to withdraw the following informational notices from our Commercial Crime program: SP 2 460 1202 - Notice - Coverage Under the Terrorism Risk Insurance Act of 2002, SP 2 461 1202 - Notice of Available Coverage Under the Terrorism Risk Insurance Act of 2002, and DN-TERROR-REJECT 1102 - Disclosure Notice Terrorism Risk Insurance Act of 2002 Rejection of Our Offer of Coverage. Crime is no longer included in the Federal Terrorism Risk Insurance Act (TRIA); therefore, these notices are now obsolete.

<i>SERFF Tracking Number:</i>	<i>ERCB-125773446</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Westport Insurance Corporation</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR-08-03861</i>		
<i>TOI:</i>	<i>26.0 Burglary & Theft</i>	<i>Sub-TOI:</i>	<i>26.0001 Commercial Burglary & Theft</i>
<i>Product Name:</i>	<i>Terrorism Form Withdrawal</i>		
<i>Project Name/Number:</i>	<i>Terrorism Form Withdrawal/AR-08-03861</i>		

We respectfully request this filing become effective September 1, 2008.

Company and Contact

Filing Contact Information

Rod Clark, Forms Analyst	rodney_clark@swissre.com
5200 Metcalf	(800) 255-6931 [Phone]
Overland Park, KS 66201	(913) 676-6226[FAX]

Filing Company Information

Westport Insurance Corporation	CoCode: 39845	State of Domicile: Missouri
5200 Metcalf	Group Code: 181	Company Type:
Overland Park, KS 66201	Group Name: Swiss Re	State ID Number:
(800) 255-6931 ext. [Phone]	FEIN Number: 48-0921045	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	Form filing
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Westport Insurance Corporation	\$50.00	08/13/2008	21916853

<i>SERFF Tracking Number:</i>	<i>ERCB-125773446</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Westport Insurance Corporation</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR-08-03861</i>		
<i>TOI:</i>	<i>26.0 Burglary & Theft</i>	<i>Sub-TOI:</i>	<i>26.0001 Commercial Burglary & Theft</i>
<i>Product Name:</i>	<i>Terrorism Form Withdrawal</i>		
<i>Project Name/Number:</i>	<i>Terrorism Form Withdrawal/AR-08-03861</i>		

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Withdrawn	Llyweyia Rawlins	08/13/2008	08/13/2008

<i>SERFF Tracking Number:</i>	<i>ERCB-125773446</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Westport Insurance Corporation</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AR-08-03861</i>		
<i>TOI:</i>	<i>26.0 Burglary & Theft</i>	<i>Sub-TOI:</i>	<i>26.0001 Commercial Burglary & Theft</i>
<i>Product Name:</i>	<i>Terrorism Form Withdrawal</i>		
<i>Project Name/Number:</i>	<i>Terrorism Form Withdrawal/AR-08-03861</i>		

Disposition

Disposition Date: 08/13/2008
Effective Date (New): 09/01/2008
Effective Date (Renewal): 09/01/2008
Status: Withdrawn
Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	ERCB-125773446	State:	Arkansas
Filing Company:	Westport Insurance Corporation	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-08-03861		
TOI:	26.0 Burglary & Theft	Sub-TOI:	26.0001 Commercial Burglary & Theft
Product Name:	Terrorism Form Withdrawal		
Project Name/Number:	Terrorism Form Withdrawal/AR-08-03861		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Withdrawn	Yes
Form	Disclosure Notice - Terrorism Risk Insurance Act of 2002 - Rejection of Our Offer of Coverage	Withdrawn	Yes
Form	Notice - Coverage Under the Terrorism Risk Insurance Act of 2002	Withdrawn	Yes
Form	Notice of Available Coverage Under the Terrorism Risk Insurance Act of 2002	Withdrawn	Yes

SERFF Tracking Number:	ERCB-125773446	State:	Arkansas
Filing Company:	Westport Insurance Corporation	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-08-03861		
TOI:	26.0 Burglary & Theft	Sub-TOI:	26.0001 Commercial Burglary & Theft
Product Name:	Terrorism Form Withdrawal		
Project Name/Number:	Terrorism Form Withdrawal/AR-08-03861		

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Withdrawn	Disclosure Notice DN- - Terrorism Risk Insurance Act of 2002 - Rejection of Our Offer of Coverage	TERROR- REJECT	1102	Disclosure/ Withdrawn Notice	Replaced Form #: Previous Filing #:		DN-Terror- Reject 1102 _WIC_.pdf
Withdrawn	Notice - Coverage Under the Terrorism Risk Insurance Act of 2002	SP 2 460	1202	Disclosure/ Withdrawn Notice	Replaced Form #: Previous Filing #:		SP 2 460 1202.pdf
Withdrawn	Notice of Available Coverage Under the Terrorism Risk Insurance Act of 2002	SP 2 461	1202	Disclosure/ Withdrawn Notice	Replaced Form #: Previous Filing #:		SP 2 461 1202.pdf

Westport Insurance Corporation

Policy Number

**DISCLOSURE NOTICE
TERRORISM RISK INSURANCE ACT OF 2002
REJECTION OF OUR OFFER OF COVERAGE**

Named Insured:

Effective Date:

12:01 A.M., Standard Time

Agent Name:

Agent No.:

You have rejected our offer of coverage for certified acts of terrorism, as defined in and certified under the Terrorism Risk Insurance Act of 2002. Therefore, this policy does not provide such coverage. This policy contains one or more exclusions that apply to certified acts of terrorism.

If you were not made aware of our offer of coverage for certified acts of terrorism, or believe that this notice was included in this policy in error, please notify your agent or broker immediately.

NOTICE - COVERAGE UNDER THE TERRORISM RISK INSURANCE ACT OF 2002

NAMED INSURED:

LINES OF COVERAGE:

The tragic events of September 11, 2001 have impacted our country in many ways. The insurance industry responded immediately to these events, and has provided billions of dollars of payments. However, the possibility of future attacks has created what Congress describes as an “unprecedented financial risk” with a significant impact on the economy. As a result, Congress passed the Terrorism Risk Insurance Act of 2002 (The Act). This Notice informs you of your rights under the Act.

WHAT IS AN “ACT OF TERRORISM”?

- An “act of terrorism” is defined as:

Any act that is certified by the Secretary of the Treasury in concurrence with the Secretary of State and the Attorney General of the United States pursuant to the Act:

- (1) To be an act of terrorism;
- (2) To be a violent act or an act that is dangerous to (a) human life; (b) property; or (c) infrastructure;
- (3) To have resulted in damage within the United States, or outside the United States in the case of certain aircraft or vessels, or on the premises of a US mission; and
- (4) To have been committed by an individual or individuals acting on behalf of any foreign person or foreign interest as part of an effort to coerce the civilian populations of the US or to influence the policy or affect the conduct of the US Government by coercion.

- No act will be certified as an “act of terrorism” if:

- (1) It does not meet the above criteria;
- (2) The act is committed as part of the course of war declared by Congress (other than with respect to Workers’ Compensation);
- (3) Property and casualty losses resulting from the act, in the aggregate, do not exceed \$5,000,000.

As used in this Notice, the phrases “act of terrorism” and “acts of terrorism,” when set out in quotation marks, are to be construed as defined above.

WHAT IS AN "INSURED LOSS"?

An **"insured loss"** is any loss (other than amounts attributable to punitive damages) that is caused by an **"act of terrorism"** (including an act of war, in the case of workers' compensation) if such loss:

- (1) occurs within the United States,
- (2) occurs to an air carrier (as defined in 49 U.S.C. § 40102), to a U.S. flag vessel (or a vessel based principally in the U.S., on which U.S. income tax is paid and whose insurance coverage is subject to regulation in the U.S.), or
- (3) occurs at the premises of any U.S. mission.

As used in this Notice, the phrases "insured loss" or "insured losses," when set out in quotation marks, are to be construed as defined above.

THE FEDERAL GOVERNMENT'S SHARE OF PAYMENTS FOR "INSURED LOSS"

Under the Act, the Federal government will reimburse us for 90% of our payments due to "insured losses" (excluding any amounts attributable to punitive damages) in excess of a deductible until the total payments made by all insurers for "insured loss" reaches \$100 billion. Our deductible will be:

- A. 1% of our 2001 direct earned premium for "insured loss" that occurs during the period beginning 26 November 2002 and ending on 31 December 2002, and
- B. 7% of our 2002 direct earned premium for "insured loss" that occurs during 2003, and
- C. 10% of our 2003 direct earned premium for "insured loss" that occurs during 2004.

Other deductibles will apply to insured losses that occur during subsequent years in which the program is in effect. For purposes of determining such deductibles, "direct earned premium" means only the premiums earned on the commercial lines of property and casualty insurance covered by the Act for U.S. risks or vessels, aircraft and foreign missions outside the U.S. covered by the Act.

If total "insured losses" of all property and casualty insurers reach \$100 billion during the period beginning on November 26, 2002 and ending on December 31, 2003, (or in any subsequent year in which the program is in effect) we will not be liable under our policies for our portion of such losses that exceed such amount. The amounts we pay to you under your policy may be reduced as a result. In addition, we may reserve our rights when we make payments to you, and we may require an undertaking from you to return any overpayment to us.

HOW DOES THE ACT AFFECT INSURANCE COVERAGE?

- **As required by the Act, this Notice constitutes notice to you of the existence of the Act, and the payments which will be made from the Federal Government if there is a certified “act of terrorism.”**
- **Should you choose to bind coverage, your policy of insurance would be issued without a terrorism exclusion attached and there would be no additional premium attributable to coverage for certified “acts of terrorism.”**
- **In the time between inception of coverage and the next renewal we will examine and refine our treatment of terrorism under your policy. This means that you may or may not have the same terms offered to you upon renewal and that the premium charged may or may not reflect alteration based upon the terrorism exposure.**

NOTICE OF AVAILABLE COVERAGE UNDER THE TERRORISM RISK INSURANCE ACT OF 2002

**– IMPORTANT –
THIS NOTICE DISCUSSES A DECISION
YOU MUST MAKE ON COVERAGE FOR ACTS OF TERRORISM**

DATE OF ACT: **November 26, 2002**

NAMED INSURED:

LINES OF COVERAGE:

PREMIUM FOR COVERAGE FOR AN “ACT OF TERRORISM”:

The tragic events of September 11, 2001 have impacted our country in many ways. The insurance industry responded immediately to these events, and has provided billions of dollars of payments. However, the possibility of future attacks has created what Congress describes as an “unprecedented financial risk” with a significant impact on the economy. As a result, Congress passed the Terrorism Risk Insurance Act of 2002 (The Act). This Notice informs you of your rights and obligations under the Act.

WHAT IS AN “ACT OF TERRORISM”?

- An “act of terrorism” is defined as:

Any act that is certified by the Secretary of the Treasury in concurrence with the Secretary of State and the Attorney General of the United States pursuant to the Act:

- (1) To be an act of terrorism;
- (2) To be a violent act or an act that is dangerous to (a) human life; (b) property; or (c) infrastructure;
- (3) To have resulted in damage within the United States, or outside the United States in the case of certain aircraft or vessels, or on the premises of a US mission; and
- (4) To have been committed by an individual or individuals acting on behalf of any foreign person or foreign interest as part of an effort to coerce the civilian populations of the US or to influence the policy or affect the conduct of the US Government by coercion.

- No act will be certified as an “act of terrorism” if:

- (1) It does not meet the above criteria;
- (2) The act is committed as part of the course of war declared by Congress (other than with respect to Workers’ Compensation);
- (3) Property and casualty losses resulting from the act, in the aggregate, do not exceed \$5,000,000.

As used in this Notice, the phrases “act of terrorism” or “acts of terrorism,” when set out in quotation marks, are to be construed as defined above.

WHAT IS AN "INSURED LOSS"?

An **"insured loss"** is any loss (other than amounts attributable to punitive damages) that is caused by an **"act of terrorism"** (including an act of war, in the case of workers' compensation) if such loss:

- (1) occurs within the United States,
- (2) occurs to an air carrier (as defined in 49 U.S.C. § 40102), to a U.S. flag vessel (or a vessel based principally in the U.S., on which U.S. income tax is paid and whose insurance coverage is subject to regulation in the U.S.), or
- (3) occurs at the premises of any U.S. mission.

As used in this Notice, the phrases "insured loss" or "insured losses," when set out in quotation marks, are to be construed as defined above.

THE FEDERAL GOVERNMENT'S SHARE OF PAYMENTS FOR "INSURED LOSS"

Under the Act, the Federal government will reimburse us for 90% of our payments due to "insured losses" (excluding any amounts attributable to punitive damages) in excess of a deductible until the total payments made by all insurers for "insured loss" reaches \$100 billion. Our deductible will be:

- A. 1% of our 2001 direct earned premium for "insured loss" that occurs during the period beginning 26 November 2002 and ending on 31 December 2002, and
- B. 7% of our 2002 direct earned premium for "insured loss" that occurs during 2003, and
- C. 10% of our 2003 direct earned premium for "insured loss" that occurs during 2004.

Other deductibles will apply to insured losses that occur during subsequent years in which the program is in effect. For purposes of determining such deductibles, "direct earned premium" means only the premiums earned on the commercial lines of property and casualty insurance covered by the Act for U.S. risks or vessels, aircraft and foreign missions outside the U.S. covered by the Act.

If total "insured losses" of all property and casualty insurers reach \$100 billion during the period beginning on November 26, 2002 and ending on December 31, 2003, (or in any subsequent year in which the program is in effect) we will not be liable under our policies for our portion of such losses that exceed such amount. The amounts we pay to you under your policy may be reduced as a result. In addition, we may reserve our rights when we make payments to you, and we may require an undertaking from you to return any overpayment to us.

WHAT MUST YOU DO?

As required by the Act, this Notice constitutes an offer of coverage for losses arising out of an "act of terrorism" and presents our premium charge for that coverage.

You must decide whether you wish to purchase the coverage for losses you might have arising out of or resulting from an "act of terrorism." The amount of premium you must pay for adding this coverage is shown above. If you decide to purchase terrorism coverage you must notify us of your decision at the time of binding the remainder of coverage.

SERFF Tracking Number:	ERCB-125773446	State:	Arkansas
Filing Company:	Westport Insurance Corporation	State Tracking Number:	EFT \$50
Company Tracking Number:	AR-08-03861		
TOI:	26.0 Burglary & Theft	Sub-TOI:	26.0001 Commercial Burglary & Theft
Product Name:	Terrorism Form Withdrawal		
Project Name/Number:	Terrorism Form Withdrawal/AR-08-03861		

Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Review Status:	Withdrawn	08/13/2008
-------------------------	--	-----------------------	-----------	------------

Comments:

Attachment:

AR P&C Transmittal.pdf

Property & Casualty Transmittal Document (Revised 1/1/05)

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only
	a. Date the filing is received:
	b. Analyst:
	c. Disposition:
	d. Date of disposition of the filing:
	e. Effective date of filing:
	f. State Filing #:
	g. SERFF Filing #:

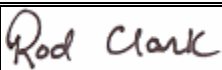
3. Group Name	Group NAIC #
Swiss Reinsurance	181

4. Company Name(s)	Domicile	NAIC #	FEIN #
Westport Insurance Corporation	MO	181-39845	48-0921045

5. Company Tracking Number	AR-08-03861
-----------------------------------	--------------------

Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6.	Name and address	Title	Telephone #s	FAX #	e-mail
	Rod Clark 5200 Metcalf Overland Park, KS 66201	Compliance Specialist	913.676.5765	913.676.6226	rodney_clark@swissre.com

7.	Signature of authorized filer	
8.	Please print name of authorized filer	Rod Clark

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	26.0 Burglary & Theft
10. Sub-Type of Insurance (Sub-TOI)	26.0001 Commercial Burglary & Theft
11. State Specific Product code(s) (if applicable)[See State Specific Requirements]	
12. Company Program Title (Marketing title)	Commercial Crime
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input checked="" type="checkbox"/> Withdrawal <input type="checkbox"/> Other
14. Effective Date(s) Requested	New: 09/01/2008 Renewal: N/A
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	
17. Reference Organization # & Title	
18. Company's Date of Filing	08/13/2008
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking #	AR-08-03861
------------	--	--------------------

21.	Filing Description [This area should be similar to the body of a cover letter and is free-form text]
------------	---

On behalf of Westport Insurance Corporation, we wish to withdraw the following informational notices from our Commercial Crime program: SP 2 460 1202 - Notice - Coverage Under the Terrorism Risk Insurance Act of 2002, SP 2 461 1202 - Notice of Available Coverage Under the Terrorism Risk Insurance Act of 2002, and DN-TERROR-REJECT 1102 - Disclosure Notice Terrorism Risk Insurance Act of 2002 Rejection of Our Offer of Coverage. Crime is no longer included in the Federal Terrorism Risk Insurance Act (TRIA); therefore, these notices are now obsolete.

We respectfully request this filing become effective September 1, 2008.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
------------	---

Check #: NA - Paid via EFT in SERFF
Amount: \$ 50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

FORM FILING SCHEDULE

(This form must be provided **ONLY** when making a filing that includes forms)
(Do not refer to the body of the filing for the forms listing.)

1.	This filing transmittal is part of Company Tracking #	AR-08-03861
-----------	--	--------------------

2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)	N/A
-----------	---	------------

3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Notice - Coverage Under the Terrorism Risk Insurance Act of 2002	SP 2 460 1202	<input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
02	Notice of Available Coverage Under the Terrorism Risk Insurance Act of 2002	SP 2 461 1202	<input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		
03	Disclosure Notice - Terrorism Risk Insurance Act of 2002 - Rejection of Our Offer of Coverage	DN-TERROR- REJECT 1102	<input type="checkbox"/> Replacement <input checked="" type="checkbox"/> Withdrawn <input type="checkbox"/> Neither		

To be complete, a form filing must include the following:

1. A completed Form Filing Schedule Document (PC FFS-1) **(Do not refer to the body of the filing for the forms listing.)** and,
2. A completed Property & Casualty Transmittal Document (PC TD-1), and
3. One copy of each form to be reviewed for the reviewer's records, and
4. One copy of any other components/exhibits submitted with the filing, and
5. The appropriate state Review Requirements, if required, and
6. The appropriate filing fees, if required, and
7. A postage-paid, self-addressed envelope large enough to accommodate the return.
8. You should refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)